This form was developed in order to obtain information about and/or to report hate crime and bias incidents in our community. Third party or anonymous complaints will be accepted, but please be aware that anonymous complaints can sometimes be difficult to investigate, as an investigator may need additional information and the complainant may be the only source available. For this reason, please consider providing contact information when submitting your complaint.

I opt to remain anonymous:	Reporting Person: Victim	Witness	Friend	Other:
First Name:	Las	t Name:		
Address:				
Phone Number:				
Date of Incident: / /	Time: a.m. / p.m	. Location:		
Description of Incident:				
Victim Information: First Name:		Last Nar	ne:	
Victim Contact Information (Addre	ess, Phone Number):			
Does the victim want contact from	an official? Yes No	)		
Do you want contact from an offici	ial? Yes No	)		
The incident was or appeared to b	e: (check all that apply)			
Verbal Assault or Slur	Threat of Physical Assault		Sexual Harassment	
"Threat of Outing"	Leafleting		Public Indecency	
Graffiti	Physical Assault		Phone Harassment	
Pursuit/Chase	Stalking		Unwanted letter or email	
I felt the incident was because of:	(check all that apply)			
Gender	Disability		Nationality	
Creed	Race		Age	
Religion	Sexual Orientation		Appearance/Color	
Ethnicity	National Origin		Other:	
To your knowledge, was the incid	ent reported to any law enfor	cement agenc	<b>y?</b> Yes No	
If ves. which agency? Fargo Police	Cass County Sheriff's Office		NDSU Police	

Thank you for taking the time to step up and help us combat hate crimes and bias incidents in Fargo.